

IMSCI2.005A



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Aristo Vojdani
Appl. No. : 10/005,684
Filed : November 8, 2001
For : SALIVA IMMUNOASSAY FOR
DETECTION OF ANTIBODIES
FOR AUTOIMMUNE DISEASE
Examiner : Nelson C. Yang
Group Art Unit : 1641

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

April 2, 2004

(Date)

Connie C. Tong, Reg. No. 52,292

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed January 5, 2004, Applicant respectfully requests the Examiner to enter the following amendments and consider the following arguments.

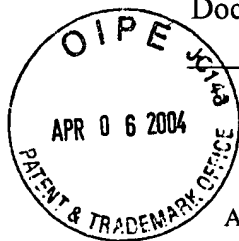
Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

04/07/2004 SMINASS1 00000103 10005684

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45.00 OP



AMENDMENT / RESPONSE TRANSMITTAL

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment in 6 pages.

(X) A copy of Information Disclosure Statement and References filed March 12, 2002.

The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	11 - 6 = 5	2202 (\$9)	5 x 9 =	\$45
Independent Claims	1 - 1 = 0	2201 (\$43)	0 x 43 =	\$0
			TOTAL FEE DUE	\$45

(X) A check in the amount of \$45 is enclosed.

(X) Return prepaid postcard.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Connie C. Tong, Attorney of Record
Registration No. 52,292
Customer No. 20,995
(949) 760-0404